

RENEWAL COUNTDOWN

***JOINT POSITION
STATEMENT ON PAIN
MANAGEMENT***

CONTENTS Vol 4 • No 4

FALL 2009

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Mission of the Board: *The mission of the State Board of Nursing for South Carolina is the protection of public health, safety, and welfare by assuring safe and competent practice of nursing.*

The purpose of the Board of Nursing is to assure the safe and effective practice of nursing in South Carolina. The Board licenses qualified individuals as registered nurses or licensed practical nurses. Complaints are investigated and disciplinary action taken whenever necessary.

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The Palmetto Nurse is published quarterly by the South Carolina Board of Nursing. Each issue is distributed to every actively licensed LPN, RN, APRN, as well as to nurse employers and nurse educators. Nurses, students, and professionals from healthcare organizations turn to this publication for updates on clinical practices and information on government affairs initiatives to discover what best practices are being implemented, and for insight into how healthcare providers are facing today's challenges.

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Walk-in applications [Advanced Practice, Endorsement and Reactivation/Reinstatement] are processed by OLC on Monday – Friday between the hours of 8:30 a.m. 5:00 p.m. An online application is available for those seeking to obtain a RN or LPN

license by examination. In the future, the online application will be available for individuals applying for a license by endorsement and Advanced Practice.

OFFICE LOCATION/HOURS OF OPERATION

The Board of Nursing is located at Synergy Business Park, Kingstree Building, 110 Centerview Drive, Suite 202, Columbia, SC 29210. Directions to our office can be found on our Web site – www.llr.state.sc.us/pol/nursing/

Our normal business hours are 8:30 a.m. to 5:00 p.m., Monday through Friday. Walk-in applications [Advanced Practice, Endorsement and Reactivation/Reinstatement] are processed by the Office of Licensure and Compliance on Monday – Friday between the hours of 9:00 a.m. - 12:00 p.m. and 1:30 p.m. - 4:00 p.m. during normal business hours. Our offices are closed for holidays designated by the State. An online examination application is available for those seeking to obtain a RN or LPN license. In the future, the online application will be available for individuals applying for a license by endorsement and Advanced Practice.

DESIGNATED STATE HOLIDAYS FOR 2009

Veterans Day November 11, 2009
Thanksgiving Day November 26-27, 2009
Christmas Day December 25-28, 2009
(Observed)

VISIT US ON OUR WEB SITE: www.llr.state.sc.us/pol/nursing/

The Board of Nursing Web site contains the Nurse Practice Act, Regulations, Compact Information, Advisory Opinions, Licensee Lookup, Disciplinary Actions, and other information.

From the Desk of the ADMINISTRATOR

By: Joan K. Bainer, RN, MN, NE BC, Board Administrator



How's the view? As a patient that is. Being a patient is, at times, an almost unbearable job description, but it is you, the nurse, who can change the scenery.

For example, when a patient experiences pain, the "view" is very distorted, and the patient is thinking about nothing else except the pain they are experiencing and perhaps what you will or will not do for the patient in order to relieve the pain.

In order to assist you in seamless nursing care, the South Carolina Board of Nursing and the South Carolina Pharmacy Board have joined together and developed a Joint Position Statement on Pain. The document reflects the Web site for the Board of Medical Examiners Pain Management Guidelines.

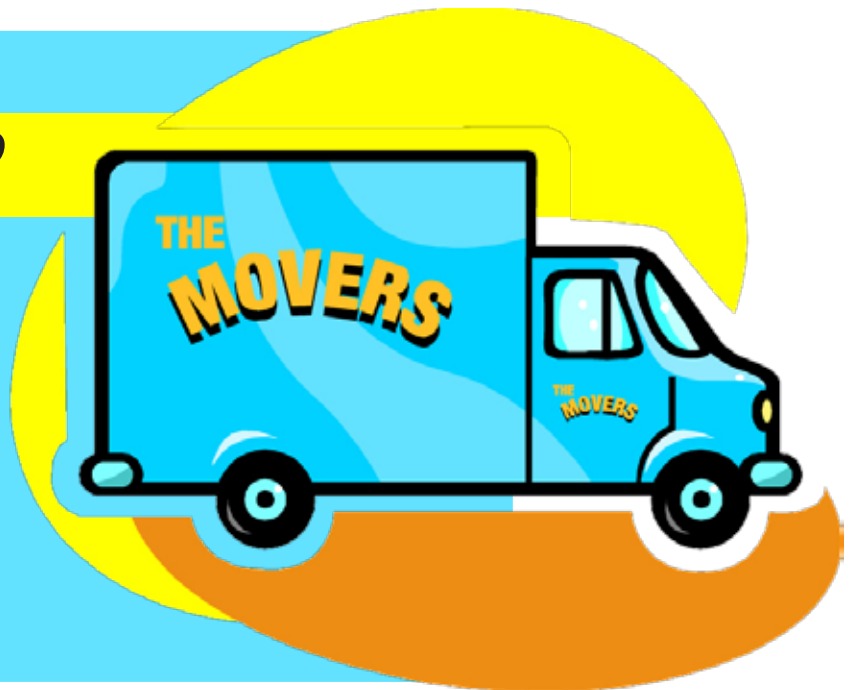
In addition, the National Council State Boards of Nursing also has a position paper on pain which the Board has adopted.

Review these documents wisely and apply them to your practice, utilizing your knowledge, skills and abilities that will be priceless to your patient.

As you change the "view" favorably for the patient what the patient, will see is a very talented, caring professional who is highly respected with the patient as the number one focus.

HAVE YOU MOVED?

Section 40-33-38 (C) of the South Carolina Nurse Practice Act requires that all licensees notify the Board in writing within 15 days of an address change. So that you do not miss important time sensitive information, such as your renewal notice and audit notice or other important licensure information, please be sure to notify the Board immediately whenever you change addresses. Failure to notify the Board of an address change may result in a public reprimand and \$500 civil penalty. You may change your address on-line utilizing the address change form under Online Services found on the Board's Web site: www.llr.state.sc.us/pol/nursing/.



Joint Position Statement on Pain Management for The South Carolina Board of Nursing and The South Carolina Board of Pharmacy



interventions are based. The goal of pain management is to reduce the individual's pain to the lowest level possible, while simultaneously increasing the individual's level of functioning to the greatest extent possible (American Pain Society, 2009).

The South Carolina Boards of Nursing and Pharmacy concur with The Joint Commission on Accreditation of Healthcare Organization's (JCAHO) guideline on pain management which declares that patients

The management of pain should include the utilization of both pharmacologic and non-pharmacologic modalities. (ASPMN, 2003).

It is therefore incumbent upon South Carolina licensed nurses and pharmacists as health care providers to work cooperatively and effectively to address the dimensions of pain and to assist with providing maximum pain relief measures with the least possible side effects. Patients and families should be assured of competent, safe, comprehensive care during each stage of disease. Nurses and pharmacists should be knowledgeable regarding effective and compassionate pain relief, and patients and families should be

Pain management is a national health care concern today for the consumer. Many health care providers and health care agencies are evaluating existing treatment modalities and processes to understand the lack of adequate pain management in the United States. Roughly, there are 50-75 million Americans experiencing some form of pain (Brekken, 2008). Significant percentages of patients undergoing cancer treatments are under treated for pain, which could impair quality of life throughout the stages of disease. (National Cancer Institute, 2009).

Inappropriate treatment of pain, including non-treatment, over treatment, and ineffective treatment, can have negative consequences for patients at large. All persons who are experiencing pain have the right to have their pain assessed and managed appropriately. All persons who are experiencing pain also have the right to refuse any undesired treatment. Patients should be encouraged to be active participants in their care. Subjective reporting of pain by the patient and family representatives is the optimal standard upon which all pain management



have the right to appropriate assessment and management of pain (2008). The application of clinical knowledge and patient-centered treatment modalities improve the quality of life for patients who suffer from pain: All health care providers who treat pain, whether acute or chronic, should become knowledgeable about effective methods of pain management.

confident such pain relief measures will be consistently provided. Communication and collaboration between members of the healthcare team, patient, and family is essential in achieving adequate pain management. In order to effectively communicate guidelines for professional practice and in the interest of public safety, the South Carolina Boards of

Continued on page 8

Nursing and Pharmacy jointly issue the following statement.

The Boards acknowledge that healthcare professionals as patient care advocates should, within their scope of practice:

1. Routinely assess all patients for pain symptoms. When patient pain is reported, both the physical assessment and historical patient data should be evaluated. Pain assessment tools utilized should reflect cultural and ethnic diversity to appropriately identify pain for diverse populations.
2. Educate patients who are reluctant to report pain symptoms on safe and effective methods of pain relief. (National Cancer Institute, 2009).
3. Work collaboratively within a multidisciplinary

10. Document all aspects of the plan of care regarding pain management in a clear, concise, and accurate manner.

11. Assist in developing organization-appropriate and evidence-based policies and protocols for pain management.

12. Continue to seek out current pain management education regarding safe and effective pain management strategies.

13. Comply with all state and federal laws and regulations regarding prescribing, dispensing, and administering medications, including controlled substances.

The S.C. Board of Medical Examiners Pain Management Guidelines are available on their Web site at: <http://www.llr.state.sc.us/pol/medical/index.asp?file=MEPAIN.HTM>.

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Balancing Act. Retrieved April 17, 2009, from <http://www.ampainsoc.org/advocacy/promoting.htm>.

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Oregon State Board of Nursing. Position Statement for Pain Management. Portland: Oregon State Board of Nursing; 2004. Available at: <http://www.oregon.gov/OSBN/pdfs/policies/painmanagement.pdf>. Accessed.

Retrieved April 17, 2009.

South Carolina Board of Medical Examiners. Pain Management Guidelines. South Carolina Board of Medical Examiners; 1999. Available at: <http://www.llr.state.sc.us/pol/medical/index.asp?file=MEPAIN.HTM>.

Significant percentages of patients undergoing cancer treatments are under treated for pain, which could impair quality of life throughout the stages of disease. (National Cancer Institute, 2009).

team that involves the patient and family as core participants to develop and implement an individualized written treatment plan of care utilizing both pharmacologic and nonpharmacologic interventions.

4. Anticipate and manage side effects of pain medications when possible.

5. Ensure that adequate pain management is available for all individuals experiencing pain.

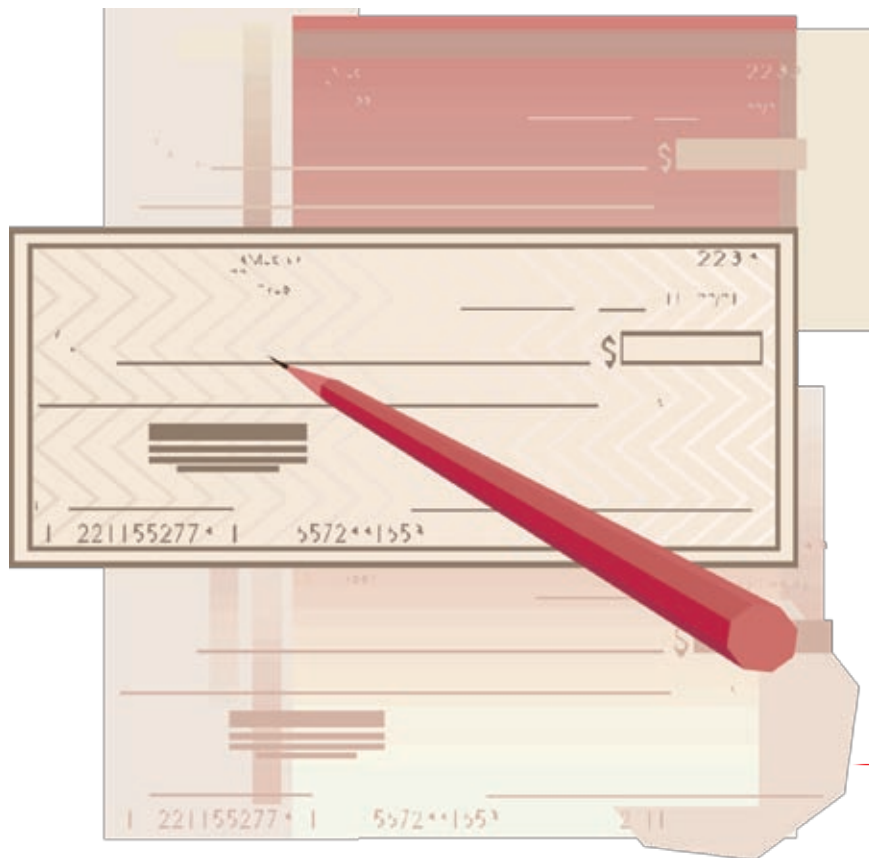
6. Provide accurate information to patients and patient representatives to assist them in making informed decisions regarding their health. Continue to encourage and involve patients in their healthcare.

7. Refer and consult with other providers as appropriate.

8. Stay informed of the risks of diversion and abuse of controlled substances and take appropriate steps to minimize risks. Be knowledgeable about state, federal, and local regulations for controlled substances.

9. Routinely evaluate the effectiveness of the treatment plan utilizing a standardized developmentally appropriate pain tool that reflects cultural and ethnic diversity.





RETURNED CHECKS

When submitting any fees to the Board of Nursing, please be certain there are sufficient funds in your account to cover your check and that the check has cleared before closing any account. Section 40-1-50(G) of the South Carolina Code of Laws states that a license shall be suspended if a fee payment is made by a check that is subsequently returned by the financial institution unpaid and is not made good within 10 days of official notification. This suspension is exempt from the Administrative Procedures Act. Unpaid checks constitute a non-payment of license fees. Section 40-33-38 (C) of the South Carolina Code of Laws (Nurse Practice Act) requires that all licensees notify the Board in writing within 15 days of any address change. When a check is returned, replacement funds plus the returned check fee allowed by law will be charged.



When was the last time you went on the Board's Web site? The Board recommends that all nurses visit the Web site (www.llr.state.sc.us/pol/nursing/) at least monthly for up-to-date information on nursing licensure. When a new advisory opinion is issued or a current advisory opinion revised, it is updated on the Web site within two weeks. The Competency Requirement, Competency Requirement Criteria, Licensure information, Advisory Opinions, Position Statements, and the Nurse Practice Act are just a few of the valuable tools and information you will find on the Web site.

The Advisory Opinions, Position Statements and the Nurse Practice Act are located under Laws/Policies. The Competency Requirement and Competency Requirement Criteria, which includes continuing education contact hours, are located under Licensure.

The Board hopes you will find this information useful in your nursing practice.

FREQUENTLY ASKED QUESTIONS ON CONTINUED COMPETENCY

Q: Are continuing education hours now mandated by the Board of Nursing?

A: No, the Board of Nursing does not mandate continuing education hours (30 contact hours in two year renewal period). It is only one of the four options for continued competency offered by the Board. The licensed nurse needs to select only one of these options.

Q: How many practice hours are required by the Board of Nursing for renewal?

A: There are no set number of hours a nurse must practice to document continued competency. However, a nurse must practice

enough hours for their employer to verify competency. Prior to choosing the hours practiced option for renewal, it is wise to check with your employer to see if the employer can and will sign your form. Verification of competency and hours practiced as evidenced by employer certification on a form approved by the Board is just one of four options for documenting continued competency. While there are four options available in the Nurse Practice Act, not all options may be available in a particular employment setting.

Q: Does a nurse have to sign my employer verification form?

A: We know nurses have non-nursing employers or employers with policies regarding who can sign such forms. It is fine for someone other than a nurse to sign the form as long as the person is able to verify nursing competency.

Q: Where do I get the Board approved employer certification form?

A: It is on our Web site at www.llr.state.sc.us/pol/nursing under Applications/Forms. Nurses need to be sure that their employer can, by their policies, complete and sign the form required by the Board to document practice hours. If they cannot, nurses must choose one of the other options.

Q: Can I count taking one course in school as a nursing program under option (c) of Section 40-33-40?

A: No. The key word in this option is "completion." You must complete all the coursework for the program before it can count toward your continued competency requirement. Some of your nursing courses (NUR) may qualify for the continuing education option. Please see the Competency Requirement Criteria on our Web site for specifics.

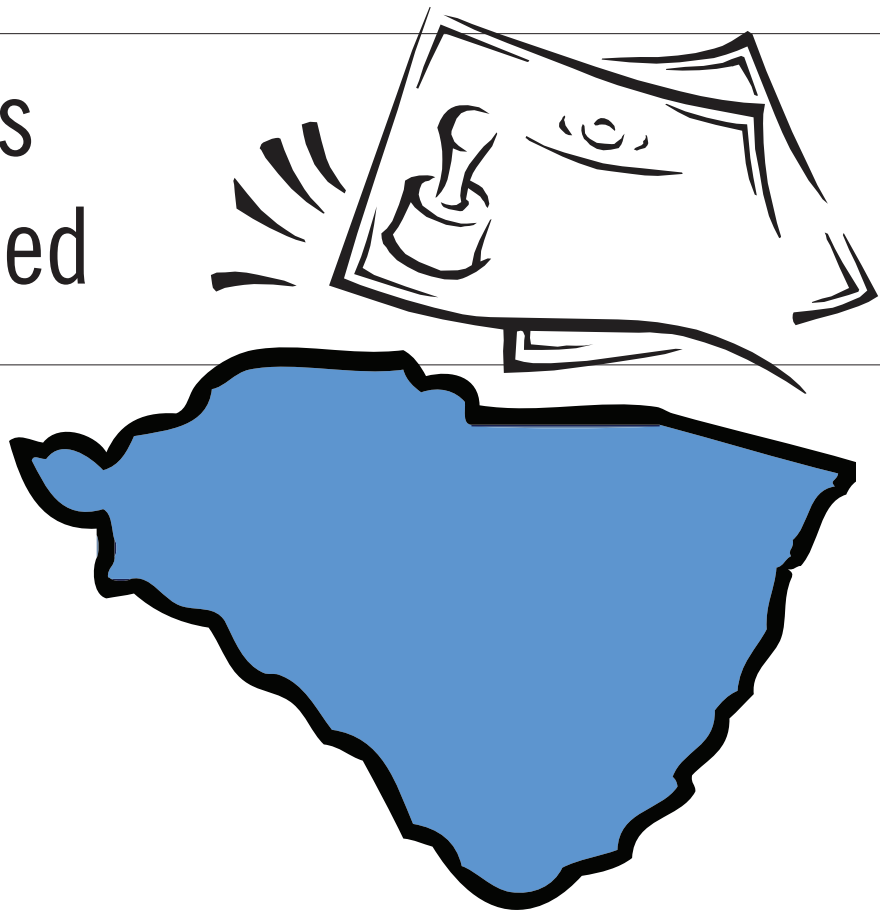
Q: Do I have to send in all my paperwork with my renewal?

A: No. Do not send any continued competency paperwork during renewal. Random audits are conducted each month. If your name is selected, you will receive a letter asking you to send the documentation in to verify competency. By law, you will have five days to provide the documents. A licensee must maintain all documented evidence of compliance for at least four years.

License Cards No Longer Issued

Starting with the 2010 - 2012 renewal cycle, the Board will no longer issue a license card. When a licensee obtains a new license or renews his/her license, a card will not be mailed.

Licensees renewing their licenses will be notified by e-mail once the licensure fees have been posted to their records. They will then be able to check the Web site and print a copy of their license information. This information can also be viewed and printed by employers or the public. When a license number is assigned to a new licensee, an e-mail or letter will notify the individual of his/her license number and expiration date. Once a licensee is notified, he/she can check online and print a copy of the license information.



3*1*1 VS 3*20*2 PLUS 45

Here is the code to all of that as follows:

As you know the 3*1*1 ratio is related to the number of liquids that you can take aboard an airplane.

The other numbers are how many APRNS a physician can supervise - 3 - and how many pharmacotherapeutic contact hours you need for renewals - 20 - and the number of hours in controlled substances - 2. The remaining number is the maximum number of miles the physician may be located from an APRN's practice – 45. The South Carolina State Board of Nursing (SCBON) has laws in the Nurse Practice Act regarding these ratios as well as a position statement.

Section 40-33-34 of the Nurse Practice Act states that a physician can precept only three (3) APRNS at a time. Anything other than that practice is in violation of the law. It is the responsibility of the APRN to assure that this does not occur. If you believe that your physician will need to supervise more than three (3) APRNS, before this occurs, you must make

this request in writing to the SCBON with the justification as to why this practice is necessary. The SCBON has no jurisdiction over the physician.

The physician must be within 45 miles of the APRN. A request for more than 45 miles must be in writing to the SCBON with the justification as to why this practice is necessary and a proposal of how it will be accomplished to include addressing patient safety.

For renewal of pharmacotherapeutics licensure, the APRN must have, in their possession, 20 contact hours, of which two must be in controlled substances. Do not submit your application if you do not have the hours during the renewal season May 1, 2008, to April 30, 2010. We will accept all contact hours obtained online, provided that the continuing education providers are approved by the Board and the contact hours meet additional requirements as outlined in our Position Statement on Pharmacotherapeutics Education Required for Prescriptive Authority Application.

COMMITTEE MEMBERS NEEDED

ADVANCED PRACTICE COMMITTEE (APC)

The Advanced Practice Committee (APC) assists the Board of Nursing with issues such as, but not limited to, advanced nursing practice, practice requirements and scope of practice. The APC meets quarterly on the first Friday in February, May, August and November of each year. There is currently a position open for a Medical/Surgical Clinical Nurse Specialist on the APC.

All APC members must be currently licensed in South Carolina, not under a current disciplinary order, certified and practicing in the area they represent. APC members are appointed for an initial term of two years with a possibility of reappointment by the Board for three years to provide for staggering of terms. Information from all interested parties is submitted to the Board for review and appointment/reappointment. Members' perspectives and participation are valued and necessary for continuity, so regular committee meeting attendance is very important. If you or someone you know is interested in serving as Medical/Surgical Clinical Nurse Specialist representative on the Advanced Practice Committee, please submit your completed nomination form (available on our Web site), along with your curriculum vitae, to Joan K. Bainer, Advanced Practice Committee, LLR-Board of Nursing, P O Box 12367, Columbia, SC 29211.

ADVISORY COMMITTEE ON NURSING (ACON)

The Advisory Committee on Nursing (ACON) assists the Board of Nursing with long-range planning for nursing and facilitates collaboration between education and practice. The ACON meets on the third Tuesday in February, April, June and October. They meet on the last Tuesday in August and first Tuesday in December each year. Under the new ACON charter, there are currently positions available for advanced practice registered nurse (APRN), associate degree educator, and baccalaureate educator representatives.



All members must be currently licensed in South Carolina, practicing in the area they represent and not be under a current disciplinary order. Members are appointed by the Board for an initial term of two years with a possibility of reappointment for three years to provide for staggering of terms. All nominations, as well as requests for reappointment, are submitted to the Board for review. Members' perspectives and participation are valued and necessary for continuity, so regular committee meeting attendance is very important. If you or someone you know is interested in serving as the advanced practice registered nurse (APRN), associate degree educator, and baccalaureate educator representative on the Advisory Committee on Nursing, please submit your completed nomination form (available on our Web site), along with your curriculum vitae, to Joan K. Bainer, Administrator, Advisory Committee on Nursing, LLR-Board of Nursing, P O Box 12367, Columbia, SC 29211.

NURSING PRACTICE AND STANDARDS COMMITTEE (NPSC)

The Nursing Practice and Standards

Committee (NPSC) assists the Board of Nursing on issues affecting nursing practice in our state. The NPSC is charged with developing and revising advisory opinions and position statements. The NPSC now meets quarterly on the third Thursday in January, April, July and October each year. There are currently positions available on NPSC for an Acute Care Licensed Practical Nurse (LPN) and Pediatric and Psychiatric/Mental Health Nurse Practitioner representatives.

All NPSC members must be currently licensed in South Carolina, practicing in the area they represent and not be under a current disciplinary order. Members' perspectives and participation are valued and necessary for continuity. If you or someone you know is interested in serving as Acute Care Licensed Practical Nurse (LPN) or Pediatric and Psychiatric/Mental Health Nurse Practitioner representative on the Nursing Practice and Standards Committee, please submit your completed nomination form (available on our Web site), along with your curriculum vitae, to Joan K. Bainer, Nursing Practice and Standards Committee, LLR-Board of Nursing, P O Box 12367, Columbia, SC 29211.

Thank You Committee Members

The Board has three committees who review information in their respective areas and make recommendations for official Board actions. Below is the current list of nurses who have volunteered to serve on these committees.

We thank you, the members of the committees, for your service to the Board.

Advanced Practice Committee (APC)

Samuel H. McNutt, Certified Registered Nurse Anesthetist, Committee Chair
Carole Bennett, CNS—Psychiatric Mental Health – Committee Vice-Chair
Faye L. Leboeuf, Certified Nurse Midwife - Committee Secretary

Stephanie Burgess, APRN Educator
Amanda Geddings, Family Nurse Practitioner
Debby Greenlaw, Acute Care Nurse Practitioner
Angela Reeves, Family Nurse Practitioner
Sheryl Russell, Adult Nurse Practitioner
Terry Sims, Pediatric Nurse Practitioner
Patti M. Smith, Certified Nurse Midwife
Wanda Walker, Certified Registered Nurse Anesthetist

Sylvia Whiting, Board Member – Ex Officio Committee Member

Currently, there is a vacancy for a Medical/Surgical Clinical Nurse Specialist on APC.

Advisory Committee on Nursing (ACON)

Linda Howe, BSN Educator – Committee Chair
Marilyn Brady, ADN Educator - Committee Vice-Chair
Donna Fortenberry, SC League for Nursing - Committee Secretary

Stephanie Burgess, Graduate Educator
Luerine Green, SC Federation of LPN
Vicki Green, SC Nurses Association
Jeanne Gué, PN Educator
Beverly Gullede, SC Practical Nurse Educators

Diane Jacobs, Continuing Education
Kathy Jenkins, Nursing Admin-Mental Health
Margaret Kroposki, SC Deans & Directors Council
Margie Moore, Nursing Admin-Comm. Care
Angie Olawsky, Nursing Admin-Public Health
Angela Reeves, Nursing Admin-Long Term Care
Mary Jo Scribner-Howard, Nursing Admin-Hospital Urban/Large
Carole Siegfried, SC Organization of Nurse Leaders
Shelly Lynn Weilenman, Nursing Admin-Hospital Rural/Small

Carrie Houser James, Board Member – Ex Officio Committee Member

Currently, ACON has vacancies for ADN Educator, BSN Educator and Advanced Practice.

Nursing Practice and Standards Committee (NPSC)

Cynthia Williams, Acute Care RN – Committee Chair
Glyne Sommer, Critical Care - Committee Vice-Chair
Ann Rexrode, Home Health/Hospice – Committee Secretary

Nydia Harter, Maternal Child/OB
Pamela Howell, Long Term Care/Gerontology
Arlene Johnson, Education
Benjamin E. Marrett, Emergency Nursing
Jo Ann Price, Community Health
Kathleen Sheppard, Advanced Practice
Carlette Stewart, SCONL
Cathy Young-Jones, School Nursing

Brenda Martin, Board Member – Ex Officio Committee Member

Currently, NPSC has vacancies for Acute Care LPN, Pediatric Nurse Practitioner and Psychiatric/Mental Health Nurse Practitioner.

Please see page 14 for more information on committee vacancies.

Online Licensure Verification



There are three ways of verifying a South Carolina nursing license.

For licensure issuance purposes:

1. If your original state of licensure is Alaska, Arizona, Arkansas, Colorado, Delaware, Florida, Idaho, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New Hampshire, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oregon, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia-PN, or Wisconsin, you will go to <https://www.nursys.com> and choose Nurse Licensure Verification which provides online verification to a nurse requesting to practice in another jurisdiction. After you complete the online process and pay the required fee, verification is immediately available to the jurisdiction(s) applied to. If your original state of licensure is not listed above, you will need to request verification from that state. Be sure to contact the state regarding any fees for this service.

For verification by the public or employers:

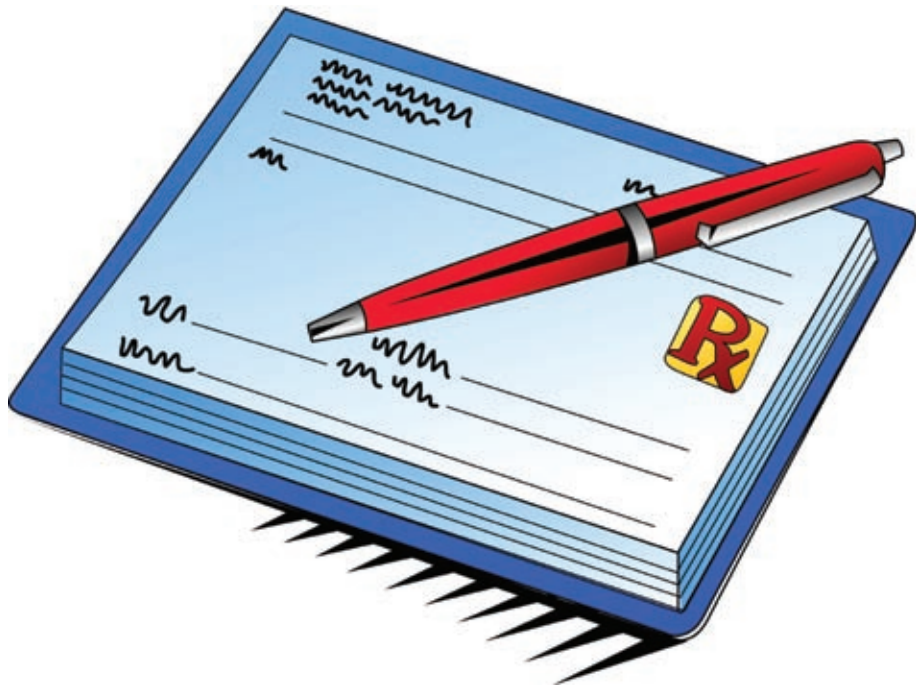
- You may utilize Licensee Lookup. The link to this service is located at the top of the Board's Web site. Go to www.llr.state.sc.us/pol/nursing, click on Licensee Lookup and choose Nursing. As you enter information, it is recommended that you enter a portion of the nurse's name only. You will be provided with the nurse's name, city and state, license number and type, date license was issued and when it expires, status of the license and whether it is multi-state or single state.
- QuickConfirm is a new service of the National Council of State Boards of Nursing (NSCBN). It is quick and easy. Go to <https://www.nursys.com/> and click on QuickConfirm and follow the instructions. You will be provided with the nurse's name, state of licensure, license type and number, license status, license expiration date and discipline status.
- Currently the following states are participating in QuickConfirm: Alaska, Arizona, Arkansas, Colorado, Delaware, District of Columbia, Florida, Idaho, Indiana, Iowa, Kentucky, Louisiana - RN, Maine,

Maryland, Massachusetts, Minnesota, Mississippi, Nebraska, New Hampshire, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virgin Islands, Virginia, West Virginia - PN, Wisconsin, Wyoming.

As we move toward paperless licensure, we hope you will find these useful.

CONTROLLED SUBSTANCE REGULATION

An Advanced Practice Registered Nurse (APRN) who wishes to prescribe controlled substances in Schedules III - V must complete the South Carolina Controlled Substances Registration Application (www.sc.dhec.gov/administrative/library/D-117A.pdf), and submit it along with a copy of their nursing license with prescriptive authority to Bureau of Drug Control, South Carolina Department of Health and Environmental Control. An applicant may submit their application and request that it be held until after January 1 if the start date for practice in South Carolina is after that date. Applicants who have a federal Drug Enforcement Agency (DEA) registration may transfer their registration by accessing the U.S. DEA Web site at www.deadiversion.usdoj.gov and completing an address change request. APRNs may apply for both federal and state registration for controlled substances with the Bureau of Drug Control, South Carolina Department of Health and Environmental Control, 2600 Bull Street, Columbia, SC 29201. Questions regarding controlled substance registration should be directed to the Bureau of Drug Control at 803-896-0634.



BOARD and COMMITTEE MEETINGS

BOARD OF NURSING MEETINGS

January 28-29, 2010

March 25-26, 2010

May 20-21, 2010

July 29-30, 2010

September 30-October 1, 2010

November 18-19, 2010

ADVANCED PRACTICE COMMITTEE (APC)

February 5, 2010

May 7, 2010

August 6, 2010

November 5, 2010

ADVISORY COMMITTEE ON NURSING (ACON)

February 16, 2010

April 20, 2010

June 15, 2010

August 31, 2010

October 19, 2010

December 7, 2010

NURSING PRACTICE & STANDARDS COMMITTEE (NPSC)

January 14, 2010

April 8, 2010

July 8, 2010

October 14, 2010

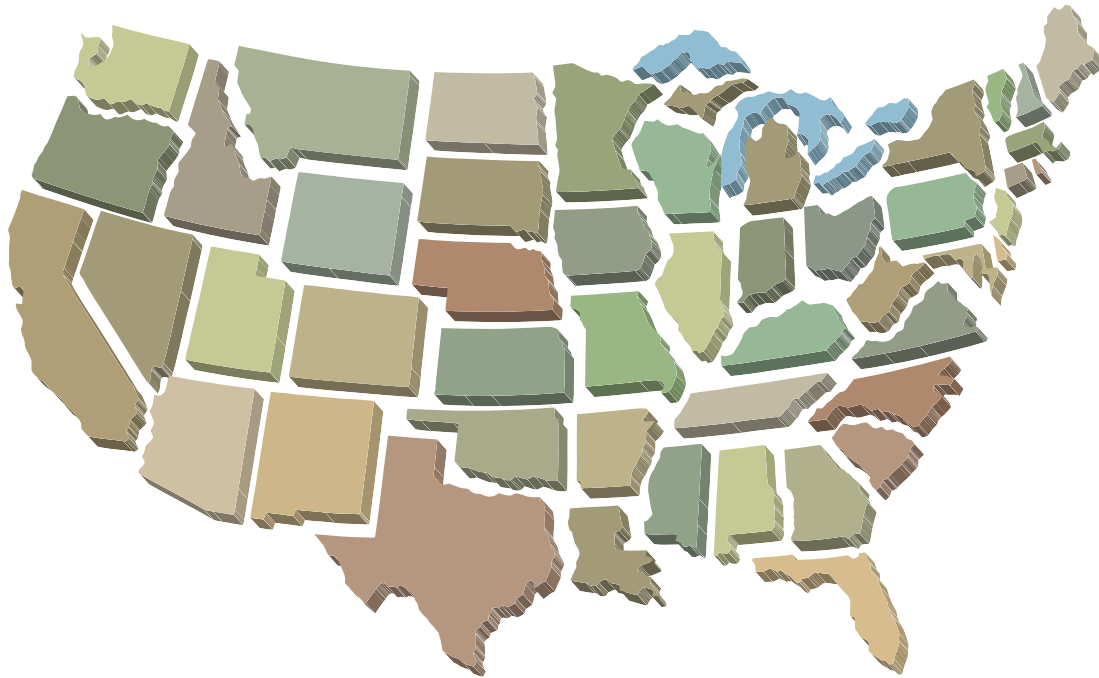
Online Application for Initial Licensure Available for Nurses

The Nursing Board has recently made changes to the initial licensure process in an effort to become more efficient, to streamline processes and to move towards a paperless licensure system.

An online application for initial licensure is now available for those seeking to obtain a RN or LPN license by examination. In the future, the online application will be available for individuals applying for a license by endorsement and Advanced Practice.

NCSBN Unveils New Nursys.com Web Site

with Enhanced Nurse Licensure Verification Tools



Chicago - The National Council of State Boards of Nursing's (NCSBN) Nursys.com license verification Web site recently unveiled a new and improved verification process, which makes nurse license verification quicker, easier and free of charge to employers and the general public.

The Licensure QuickConfirm application allows employers and the general public to verify licenses from a public access Nursys-licensure-participating board of nursing.* Within minutes, a detailed report is generated containing the nurse's name, jurisdiction, license type, license number, license status, expiration dates, as made available by the board of nursing for all licenses held, and any discipline against the license.

In addition, Nursys.com also enables nurses to verify their license(s) from a Nursys licensure participating board of nursing** when applying for endorsement into another state by using the online Nurse Licensure Verification application. Nurses can verify their licenses by completing the Nursys verification process for \$30.00 per license type, per each state board of nursing where the nurse is applying. The nurse's license verification

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is available immediately to the endorsing board of nursing.

"We feel that online nurse licensure verification is extremely important, especially in the evolving and often mobile world of health care," said Kathy Apple, MS, RN, CAE, NCSBN CEO. "Nursys.com contains data obtained directly from the licensure systems of the boards of nursing. This allows nurses and employers to verify licenses in a secure manner while boards of nursing continue to protect the public."

For those states participating in the Nurse Licensure Compact (NLC), which is a mutual recognition model of nurse licensure that allows a nurse to have one license (in his or her state

of residency) to practice in multiple states, Nursys.com can be used to verify a nurse's NLC status (multistate/single state) and any discipline against privilege to practice from an NLC state. A nurse must legally reside in an NLC state in order to be eligible for a multistate license in the NLC. An active, unencumbered, multistate license allows the nurse to practice in all 23 NLC*** jurisdictions. Questions about NLC eligibility and legal residency can be directed to the state's board of nursing. Currently, Nursys.com is the only verification tool available that provides the status of a multistate license's privilege to practice in NLC jurisdictions.

The National Council of State Boards of
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Nursing (NCSBN) is a not-for-profit organization whose members include the boards of nursing in the 50 states, the District of Columbia and four U.S. territories- American Samoa, Guam, Northern Mariana Islands and the Virgin Islands. The College of Registered Nurses of British Columbia is an associate member.

Mission: The National Council of State Boards of Nursing (NCSBN), composed of Member Boards, provides leadership to advance regulatory excellence for public protection.

*QuickConfirm Public Access Licensure Participating Boards of Nursing as of May 1, 2009:

Alaska, Arizona, Arkansas, Colorado, Delaware, District of Columbia, Florida, Idaho, Indiana, Iowa, Kentucky, Louisiana - RN, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Nebraska, New Hampshire, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virgin Islands, Virginia, West Virginia - PN, Wisconsin, Wyoming.

**Nursys Licensure Participating Boards of Nursing as of May 1, 2009:



Alaska, Arizona, Arkansas, Colorado, Delaware, District of Columbia, Florida, Idaho, Indiana, Iowa, Kentucky, Louisiana - RN, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New Hampshire, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virgin Islands, Virginia, Washington, West Virginia - PN, Wisconsin, Wyoming.

***NLC Participating States as of May 1, 2009:

Arizona, Arkansas, Colorado, Delaware, Idaho, Iowa, Kentucky, Maine, Maryland, Mississippi, Nebraska, New Hampshire, New Mexico, North Carolina, North Dakota, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, Wisconsin.

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It is not too early to begin thinking about your 2010 nursing license renewal. Online renewals will begin in February 1, 2010. You may be randomly audited at any time, so be prepared to provide documentation of the competency option you chose for renewal.

Section 40-33-40 of the Nurse Practice Act states that renewal of an active license biennially requires documented evidence of at least one of the requirements listed below during the two year licensure period. You are not required to complete more than one of the options. For this renewal, we will be looking at competencies completed and documented between May 1, 2008, and April 30, 2010, and prior to renewal of your license.

- (a) completion of 30 contact hours from a Board-recognized continuing education provider; OR
- (b) maintenance of certification or recertification by a Board-recognized national certifying body; OR
- (c) completion of a Board-recognized academic program of study in nursing or a related field; OR
- (d) verification of competency and the number of hours practiced, as evidenced by employer certification on a Board-approved form.

Prior to renewing your nursing license, please review your documentation demonstrating continuing nursing competence. Here are a few suggestions that we hope you will find helpful as you think about your 2010 renewal:

- When you renew your license and choose a continued competency option, that option must be completed and documented *prior* to renewing your license. The Competency Requirement and Competency Requirement Criteria can be found on our web site under Licensure. When you complete your renewal, you are attesting that you have completed the competency option chosen and that all information on your renewal application is true and correct.
- As you review continuing education courses for renewal of your license, verify on the Competency Requirement Criteria that the course is accepted by the Board for your renewal. Remember that the requirement is 30 contact hours, not continuing education units (CEU). Documentation of continuing education must include your name, the title of the educational activity, date of the activity, number of contact hours awarded and the name of the approving provider/organization name, number and address.
- Considering obtaining or renewing a special nursing certification? Review the Competency Requirement Criteria. Your certification may meet the requirements to renew your nursing license. Documentation of certification must include your name, certifying organization, certification title, date awarded and the expiration date.
- If you receive a higher nursing degree during the renewal period (May 1, 2008 - April 30, 2010) and choose that option for renewal, a transcript must be submitted to the Board directly from the school if you are audited.

• Before choosing the employer Verification of Competency option, make sure your employer can and will sign your Employer Certification which can be found on our Web site under Applications/Forms. If that option is available, you may want to consider having your employer sign the form at your annual performance review to avoid the renewal rush. Do not assume that your employer will sign the form. Please be aware that some employers, by facility policy, cannot sign the forms verifying competency.

• Keep a special folder in a safe place for your nurse licensure information. As you gather information, place it in the front of your folder so that it is always in chronological order. You will be ready should you be selected for the competency audit. Your nurse license folder may include, but not be limited to, the following:

- User ID and password for online renewal.
- Printed copy of your biennial online renewal and payment receipt.
- Copies of continuing education certificates.
- Copies of your certifications and recertifications including the certificates, for the required continuing education.
- Copies of Employer Certification – Verification of Competency and Nursing Practice Hours Worked.
- Copies of any documentation sent to the Board of Nursing regarding your license.

We hope this information will assist you with your renewal. Remember, it is never too early to begin planning for your next renewal.

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